

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09780499	FILING DATE 02/12/01				
							APPLICANT(S)					
							CLAIMS					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							51					
2							52					
3							53					
4							54					
5							55					
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42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	3	J		J		J	TOTAL IND.		J		J	
TOTAL DEP.	7	J		J		J	TOTAL DEP.		J		J	
TOTAL CLAIMS	10						TOTAL CLAIMS					

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